

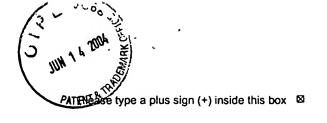
PTO/SB/01A (05-03)
Approved for use through 05/31/2003. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

Title of Invention	itle of Invention Activated Carbons From Animal Manure				
As the below named inventor(s), I/we declare that:					
This declaration is directed to:					
	The attached application, or Application No. 10/784,049, fi				
	as amended on N/A	(if app	licable);		
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;					
I/we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;					
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.					
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.					
FILL NAME OF IN	IVENTOR(S)	•			
FULL NAME OF INVENTOR(S)					
Inventor one: Is:	abel M. Lima				
Signature:	isolatuma	Citizen of:	U.S.		
Inventor two: Wayne E. Marshall					
Signature:	igne f. marshall	Citizen of:	U.S.		
Inventor three:					
Signature:		Citizen of:			
Inventor four:					
Signature:		Citizen of:			
Additional inventors are being named on additional form(s) attached hereto.					

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1 minute to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



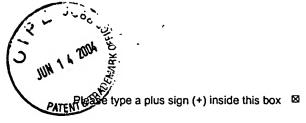
PTO/SB/81 (10-00)

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	1100000			tion Number	10/784,049		
POWER OF ATTORNEY OR		Filing Date		February 20, 2004			
		First Named Inventor		Isabel M. Lima			
AUTHORIZATION OF AGENT		Group Art Unit					
			Examiner Name				
			Attorney Docket Number		0086.03		
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	ers at (Customer Number		05740	·		
OR □ Practitioner(s) named below:				25712			
	J. (J)		<u> </u>				
		Name		Registrat	on Number		
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as mv/our	attorn	ey(s) or agent(s) to prosecut	e the ar	plication identifi	ed above, and to transact all		
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I am the:							
☑ Applicant/	Invent	or.					
-							
		ord of the entire interest. See					
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).							
SIGNATURE of Applicant or Assignee of Record							
Name		Isabel M. Lima					
Signature		Istatura					
Date		06/02/2004					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.							
☑ *Total of <u>2</u> forms are submitted.							

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		Application Number		10/784,049		
POWER OF ATTORNEY OR AUTHORIZATION OF AGENT		Filing Date		February 20, 2004		
			ed Inventor	Isabel M. Lima		
AUTHORIZA	ATION OF AGENT	Group Art				
		Examiner				
11	Attorney D	ocket Number	0086.03			
I hereby appoint: Practitioners at	: Customer Number					
OR	21	5712				
□ Practitioner(s) named below:						
	Name		Registration Number			
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			-			
	ney(s) or agent(s) to prosecut United States Patent and Tra					
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	ntioned Customer Number.					
□Firm <i>or</i> Individual Name						
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City		State		Zip		
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I am the:						
Applicant/Inventor.						
- TF						
☐ Assignee of record of the entire interest. See 37 CFR 3.71.						
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).						
SIGNATURE of Applicant or Assignee of Record						
Name	Wayne E. Marshall					
Signature	Napre 8. Morolall					
Date	6/2/04					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.						
☑ *Total of 2 forms are submitted.						
Burden Hour Statement: This	form is actimated to take 3 minutes to con	nolete. Time will	van depending un	n the needs of the individual case. Any comments		

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